## SEARCH REQUEST FORM

## Scientific and Technical Information Center

Requester's Full Name: District	ne Bost	Examiner #: 6875   Date: 114104
Art Unit: 2600 Phone	Number 30	Examiner #: 6595   Date: 114104 Serial Number: 101767961
Mail Box Location: CPL2 8723	Results Format Pr	eferred (circle): PAPER DISK E-MAIL
If more than one search is submitted, please prioritize searches in order of  need. ***********************************		
Please provide a detailed statement of the	search topic, and describe	e as specifically as possible the subject matter to be searched
	becaused cynonyms acti	onyme and registry numbers, and comone with the concept
utility of the invention. Define any terms known. Please attach a copy of the cover	that may have a special n	neaning. Give examples or relevant citations, authors, etc, if ad abstract.
known. Please attach a copy of the cover	sacos, por missas visitas, m	
Title of Invention:		
Inventors (please provide full names): _		
Earliest Priority Filing Date:		
Earnest Friority Frining Date.		
*For Sequence Searches Only* Please inclus appropriate serial number.	te all pertinent information	(parent, child, divisional, or issued patent numbers) along with the
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STAFF USE ONLY	Type of Search	Vendors and cost where applicable
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Date Searcher Picked Up:	Bibliographic	Dr.Link
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Online Time: 25	Other	Other (specify)